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COUNTY SHERIFF  
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# COCHISE COUNTY SHERIFF SEARCH AND RESCUE

This Month in Search and Rescue

June 2020

## Special points of interest:

- Information by Deuce R24
- 6.4.2020 Training & Meeting SEACOM 1730
- 6.6.2020 Tech Training Carr Canyon Flagpole
- 6.7.2020 K-9 Training Hwy 90 N Side
- 6.13.2020 Rescue Mission Dangerous Rd
- 6.13.2020 Search Mission Sheephead
- 6.14.2020 K-9 Training Hereford Rd Trailhead
- 6.14.2020 Search Mission Post Ranch Rd
- 6.18.2020 Rescue Mission SR 80/MP 308 S
- 6.18.2020 Search & Rescue Mission / MX Border Montezuma
- 6.20.2020 Swift Water equipment exchange and IV practice
- 6.21.2020 K-9 Training Slavin Gulch
- 6.28.2020 K-9 Training Miller
- Some almost missions.

## INFORMATION BY DEUCE

### What to do

A couple notable things from the Bisbee UDA rescue:

The SAR EMTs used their cravats, soaked in water and wrapped around the patients head and neck as very effective cooling tools.

They also had electrolyte salts for the subjects, ice packs, IVs available, and water. Ice packs should be placed over the chest, under arm pits, and in the groin area inside the leg and lastly against the neck.

Speaking of water, one of our other members donated about two thirds of her water to the subjects and a Bisbee PO. It was the right thing to do within half a mile of the CP. But, she was out of water by the time she got back to the CP. So when heading out on a hot dry day, think about this stuff. The coordinators can arrange water resupply also, but it takes time to set up. Monitor the team's water and make the CP aware of any issues early.

Well done everyone

### SAR OCCASIONAL MEDICAL DAILY

Yesterday we mentioned the rescue of two dehydrated UDAs and the treatment given in the field. Since it is the hot time of year, today we will look into heat injuries a bit more. Also, we are approaching the medical portion of our training cycle so let's start to prepare.

The body has two main ways of

dissipating heat: sweating, and dilating blood vessels to bring blood near the skin. Sweating aids evaporation which removes heat. Blood vessel dilation acts like a radiator bringing warm blood near the skin to radiate heat away.

When the body's ability to cool itself is overwhelmed by conditions and exertion it leads to the three typical heat injuries: heat cramps, heat exhaustion, and heat stroke.

These injuries may progress from one to the other in textbook fashion, or present fairly suddenly as a real emergency. As smart and trained rescue and medical personnel, should we jump right into the first aid treatment of moving to shade, giving water, wet down their clothing etc.? Or, should we do something else first???

Hmmm....

### Discussion

To All,  
We should ASSESS each casualty first to establish what interventions at what levels are required. While Heat Cramps and Heat Exhaustion are signs that the body's cooling system is failing and can POSSIBLY be treated in the field, Heat Stroke is a condition where the body's cooling system has completely FAILED and no longer functions. This is an extreme medical emergency and requires IMMEDIATE INTERVENTIONS and EVACUATION of a casualty to a higher level of care. Assessments dictate what we can do on the ground medically with

our limited resources and how quickly/by what means we must evacuate said casualty. Doing a proper assessment gives the Mission Commander the medical information on the casualty he/she needs to make good, informed mission decisions.

Deuce, is that a reasonable answer? Any other questions/comments from the group? Looking forward to getting healed back up & on mission with everyone!

V/R,  
Ryan "Mongo" Richardson, R-72





## 6.6.2020 Tech Training Carr Canyon

This was an awesome training day. The weather was great and the temperature was just incredible. Several of the tech team members were signed off their TRT skills. Such as tie and rig a , load sharing anchor on two anchor points, and load-distributing anchor on three anchor points. They also got signed off on low angle evacuations. Every member was able to set up, tear down the system. Lower the team and then change over to a three two one. The rescue team had to package the subject and then use proper techniques in basket carry. "Let the system do the work." Some learned it is rather cumbersome and hard to handle the basket with a subject inside without any sling assistance or being attached to the basket. It is more difficult to lean back into the system with just the sling over the shoulder. But that is personal preference.



## MEDICAL DAILY BY DEUCE

We have completed the scene size up so now our focus narrows in towards the patient by performing our Primary Assessment. At this point we should be withing about 30 seconds of first patient contact.

First, look at the patient as you approach and get a general impression. Does he look sick, or is he very still. Talk to him and introduce yourself. You are immediately assessing the ABCs, airway, breathing, and circulation for immediate life threats. As he responds notice what his response says about his breathing and if he seems to be aware of what is happening. Assess the Level of Consciousness (LOC). Is there an immediate life threat? Ask what happened and what hurts or what is making them feel bad (chief Complaint), either of the patient, or anyone else standing there. Also very important, get his or her permission to take care of him. With the patient's permission, quickly use your hands to find bleeding and major injuries. Treat life threats before moving on with the assessment, of course. If the patient has a major bleed, you don't tell him you'll take care of that after you get his medical history.

Again these notes on patient assessments are meant to begin familiarizing you with a fairly complicated medical skill and make the class a little easier, or to refresh you on the assessment steps ( and to refresh my own memory). This note just begins to touch on the topic. There is a lot that is left out. The class will add a lot of detail and context to the basic assessment.

### To treat, or not to treat?

Is SAR a medical service, or a transport service? Do we stay and play or load and go?

Well, it depends. On lots of things. Including, who is asking the question. So, no definitive answer here. Keep in mind that almost - almost being the key word - always the best thing for the patient is to get them moving towards definitive care as quickly as possible. On the other hand, it isn't a European soccer game where we throw the broken body onto a litter and run off the field.

We are up to the history taking step of the patient assessment. If possible, getting the patient's history should be done as soon as possible (in case the patient becomes unresponsive), and also take the history as you perform other parts of the assessment. It develops information that may be important to the immediate situation, and could be critically important later in the patients treatment.

Work on memorizing these mnemonics:

### SAMPLE

Signs and symptoms  
Allergies  
Medications (prescribed and other)  
Pertinent past medical history  
Last oral intake  
Events leading to current situation

### OPQRST

Onset of symptoms  
Provocation what makes it better or worse  
Quality of pain, sharp, throbbing...  
Radiate and region does the pain radiate to other parts of body  
Severity on a scale of 0-10, 10 being worst ever  
Timing does it come and go, steady....

Did I mention there are a lot of acronyms and mnemonics to memorize? These are just to give you a little head start.

### The final step - Reassessment.

The reassessment is an ongoing process done as the patient is moved to the next level of care. This is probably more relevant to a SAR team in the wilderness than in a urban environment.

During this step we:

Repeat the primary assessment. Things can

change and other injuries or symptoms can present.

Reassess vital signs. This is critically important as it can indicate the onset of shock, for example. Or uncontrolled bleeding, or a host of other bad things that indicate a "cascade of shit" - new acronym, COS, happening with your patient.

Reassess the chief complaint. Is the chief complaint feeling a little better? Worse? Symptoms changing?

Check the interventions. Are they staying put and doing what is intended? Are bandages too tight, or too loose? Is something else needed?

Identify and treat changes. Kind of obvious but continue the active care of the patient.

A couple other things that help are to first, learn the patients name, maybe write it on some tape and put it on the patients shirt or helmet. Treat the patient like a person. We will be with him or her for a while. Also, pad, pad, pad. Comfort of the patient is very important.

There will be one person assigned as the patient's care provider. That person should be close to the patient all the time and not carrying the stokes, or involved in any other intensive activity during the carry out. And of course, write it all down. The trends of patient's condition can help the next level of care.

So that's it on the patient assessment. These notes do a poor job of describing a good assessment. But the intention, as in all these SAR daily emails, are to introduce a small topic for your familiarization and further learning and practice. The Wilderness First Aid and First Responder courses will provide a much better foundation of medical skills.

I do want to see the COS acronym adopted though...

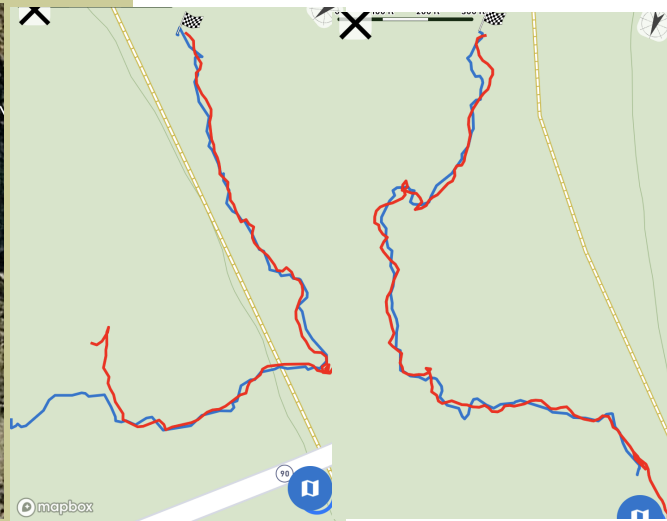


## 6.7.2020 K-9 TRAINING N HWY 90/SAN PEDRO



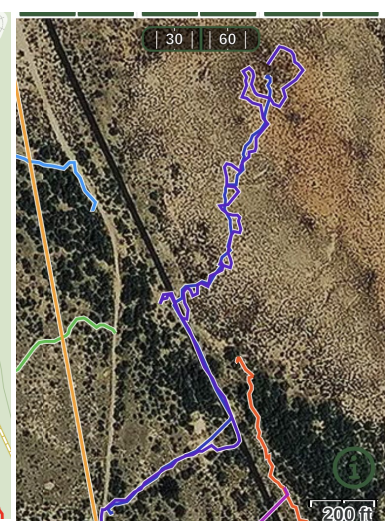
SOPHIE

Yes, this was an early training day. With the temperature climbing into the upper 90s, it is important we start early and get our training done. Also a big thank you to our trail setters and “subjects” coming out and helping us. We could not conduct efficient training without them. Also a big shout out to Jennifer for her expertise in Wilderness Search, and helping Ashley and Jasmin with some awesome pointers and drills they can incorporate. All dogs did awesome, they worked through the starts and



BRUCE

stayed right on trail. We tried to keep the trails short and not too aged, but Rockie worked the oldest one, and he did an amazing job. Bruce and Rockie had to work the railbed, which in itself is not easy. Nothing will hold the scent there, but these noses just pull it off. Great job everyone!



FRANZI



ROCKIE



*When it comes to saving lives—only the best will do—CCSOSAR, that’s who!*



7.2. 2020  
Training and Meet-  
ing SEA-  
COM

7.5.2020  
K-9  
Training  
Fairbank  
S Side  
0700

7.11.2020  
Helo  
Requals

7.12.2020  
San Ped-  
ro House  
K-9 0700

7.18.2020  
Wilderness First  
Aid

7.19.2020  
Misty Ray  
K-9 0700

7.26.2020  
Hwy 90 N  
side K-9  
0700

## July 2020

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

## August 2020

Sun	Mon	Tue	Wed	Thu	Fri	Sat
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

8.1.2020 Tech Training Haul/  
Lower W Stronghold 0900

8.2.2020 K-9 Training TBA

8.15.2020 Wilderness 1st Aid  
Trauma Cochise College Down  
Town Campus

8.16.2020 K-9 Training TBA

8.22 & 23 BASIC SAR ACADEMY  
MANDATORY FOR ALL NEW  
MEMBERS

8,9,29,29 K-9 Training TBA

## 6.13.2020 Missions Back to Back

Initially we had tech training scheduled at the Charleston Bridge. Our helo re-quals are coming up and we like to prep ourselves for that event, especially since we are using a different kind of rope. However, this was a no go, since David activated the team around 0630 hours for a rescue mission east of Douglas in the area of Dangerous Rd and the Bernadino radio towers.

This call was the start of a very busy weekend for CCSO SAR.

On Saturday morning a female called 9-1-1 reporting, she and two male subjects were lost and have run out of water almost 24 hours ago. The temperatures were extremely hot the past couple of days, and water is truly a necessity. The 9-1-1 call plotted near Dangerous Rd, but exact coordinates could not be obtained. Further, the phone could not be called back, due to the 9-1-1 prefix. A SAR coordinator knew the location of Dangerous Road east of Douglas as well as the location of several radio towers. Which were described by the female. The SAR team, along with AZDPS Air Rescue Tucson Ranger, and US Border Patrol responded to assist with the search. US Border Patrol arrived on Dangerous Road and quickly located three subjects. As the SAR team and AZDPS Tucson Ranger arrived at the base of the mountain, another 9-1-1 call was received and three more subjects, one female and two males reported being lost and dehydrated. These three were also plotting in the same area. The three were spotted higher up the mountain by US BP Agents and were brought down to the other three. All six

were brought down the mountain, where they were checked by SAR medical staff and given water. All six were then turned over to US BP Agents, since they were in the country illegally. They advised the ran out of water, each had one gallon, the day prior, and were left by their guide. The outcome could have been tragic for these six, if they could not have called for help. Too many perish in the rugged desert terrain of Cochise County and adjacent Hildago County NM.

Around 10 am, CCSO SAR left from this rescue to the area of Sheephead Peak in the Dragoon Mountains for tent, survival blanket and other climbing items. AZPD Tucson Ranger responded to assist, but due to thunderstorms in the area had to cancel until about 4 pm. Once the storm cleared Tucson Ranger attempted to insert a team to the peak, but was unable to do so, due to swirling winds. A SAR Coordinator then flew in and with binoculars determined there was no one in or near the tent who might be in the need of assistance.



At





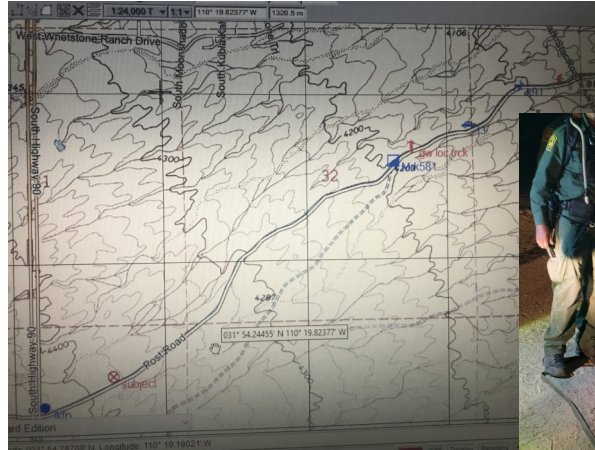
## 6.14.2020 Search Post Ranch Rd

On Sunday evening around 7 PM, SAR again was called out. This time for two lost and dehydrated males, with one being unconscious. There was no 9-1-1 plot, but the caller saw a power pole and was able to see the pole number. Sulphur Springs Electric Cooperative was contacted. They were able to provide the pole location, which was off of Post Ranch Rd and south of Benson. This information was relayed to SAR.

SAR, CCSO deputies, US Border Patrol Agents and AZDPS Phoenix Ranger responded to assist. SAR and US BP Agents arrived at the pole, but could not locate anyone. About this time, a SAR volunteer heading to the search location was driving on Post Ranch Rd from SR 90 and located a male sitting on the side of the road. It was determined he was the 9-1-1 caller. He did not know the location of the other subject. He stated he had passed out, and when he woke up the other subject was gone.

A SAR tracking team located the missing subject's footprints and began tracking him. A direction of travel was relayed to other team members on Post Ranch Road. Those team members, along with US BP K-9 and a CCSO deputy located the subject's footprints and began tracking him west. AZPD Phoenix Ranger arrived and began a FLIR Search. At approximately 1030 PM the subject was located under a tree by the BP K-9 approximately 60 yards north of Post Ranch Rd and 1/4 mile east of SR 90. Both subjects were medically checked and released to USBP. This was great interagency cooperation with eight

lives having been saved this weekend.



## 6.18.2020 Rescue Mission S of 308 SR 80 One of Two searches

The CCSO SAR team was activated around 12:30 AM for a rescue of an injured male, who had fallen approximately 30 feet off of a cliff and into the San Pedro River north of Fairbank.

The male subject had been knocked out in the fall, and when he came to was able to call 9-1-1. Due to the remote location US Border Patrol Agents and AZDPS Ranger 1 from Phoenix responded to assist.

The SAR team and US BP Agents hiked approximately 1.5 miles to the GPS coordinates from the 9-1-1 call and located the subject. He was medically checked. It was determined he has suffered severe injuries from the fall.

Ranger 1 arrived, and was able to land near the subject in the river bottom. The subject was then placed on a backboard and carried

to the helicopter. The subject was flown to Banner University Medical Center and treated for his injuries. The SAR team and US BP Agents hiked back out at daylight. This was again a great example of the cooperation and team work between CCSO SAR and other agencies.

Great work by all!

On the hike in, the team encountered several of these steep cliffs, similar to the one the subject fell off of, and without any light source,



might have taken a fall as well.



## 6.18.2020 Two of Two Searches—Dehydrated workers

Our current temperatures are brutal. The very low humidity (8%) and temperatures in the high 90s area a recipe for disaster—suffering dehydration and possible other heat related issues while doing strenuous activities.

CSO SAR was activated around 1630 hours for two surveyors suffering from heat related issues, with one having passed out several times. The ordeal for the two began around 1420 hours and they called 9-1-1. However, they were working along the border and their cell phone hit the Mexican cell tower. One of the two was finally able to call into SEACOM directly and provide the needed information, such as a GPS location. They had ran out of water and food.

The coordinates provided placed the two south of Montezuma along the US/Mexican border. The team responded to the dead end section of the border fence road and met with the USBP Agents and the subjects supervisor. He indicated he heard last from the two around 0800 hours, when they called him stating they reached their destination

Not knowing if they moved, a USBP team was going to hike in from the pass, while a four man SAR team hiked in from the current location along the survey stakes. It was determined the two were approximately 1900 feet from CP, west of a ridgeline. The terrain was steep and treacherous.

AZPDS Tucson Ranger was also en-route to assist with the search.

While hiking to the location the team came across one of the subjects, who was checked, and then guided to CP.

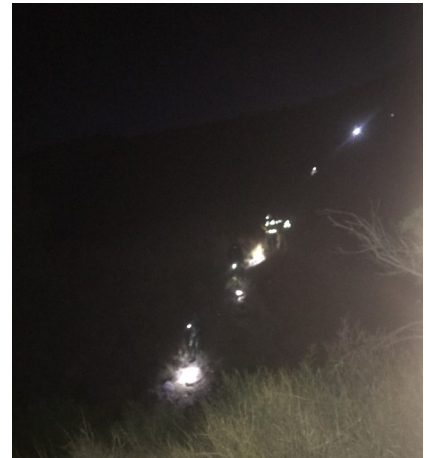
The remaining SAR team members continued to the other subject, who was under a tree about 200 yards west of the ridge line. SAR team members, who initially were tasked to hike in from Joe's Trail were called off and diverted to CP to possibly aid in a carry out. AZDPS Tucson Ranger located the other subject and gave assistance to the ground team.

The initial team made contact with the subject and provided fluids and first aid. The subject was also checked by SAR medical team as well as the two USBP Agents, who had hiked in from the pass.

Once the remainder of the SAR team arrived, they hiked to the location with some technical rescue gear.

The subject was well enough to hike back to CP.

Awesome team work by all!!

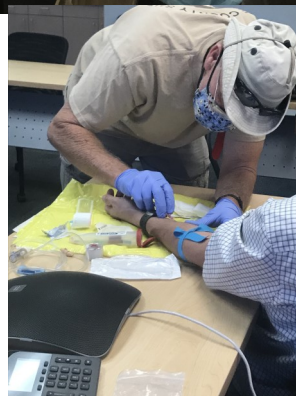


**“I am a member of a team, and I rely on the team, I defer to it and sacrifice for it, because the team, not the individual, is the ultimate champion.”**  
Mia Hamm

## 6.20.2020 Swift Water Equipment Issue and some IV Practice

We received some new SWIFT water equipment, thanks to a grant Howard B R52 wrote for the team. We also re-arranged the tech truck carrying some of the Swift Water gear getting it ready for monsoon.

Since we had several dehydrated subject rescue over the past couple of days, our EMTs practiced the IV application on some willing "victims."



## 6.21.2020 K-9 Training Slaving Gulch Area

Another great training day, and our trail setters continue to challenge us and our dogs. We for sure could not do the training we do without the dedication of several of our team members. Rick, Jackie and Tom plus spouses. There is no slacking and having to look at the terrain and wind influence is something else we need to really concentrate on. Not just for the wilderness dogs, but the trailing dogs as well.





## 6.27.2020 Tech Training Personal Skills & Helo Prep

Our last training day for personal skills and helo prep was changed by several rescue and search missions. Hence, we again tried this weekend with no interruptions, and no after training mission either, which is normally the case. We practiced rappel with various descending devices and also practiced ascending. Not so easy free hanging.



## 6.28.2020 K-9 Training Miller Canyon

We worked on controlled unknown starts with our K-9s. The team had to find the direction of travel of one trail setter from a common area, representing a campground. The trailing dogs had to work hard to get the direction of travel, having to make a bigger circle around the area the scent article was located. Our wilderness search dogs did awesome as well. Iris it getting much better in roaming away from Jasmin and working on a find-re-find. It does take a lot of work getting reliable K-9 teams. They are a tool in locating direction of travel and or the subject, and for the HRD dogs the source.





## Hug-A-Tree Benson

This was a fun training for all involved. From the kids to the volunteers who assisted with the awesome program.





*HAPPY FOURTH  
OF JULY*

*FROM ALL OF US*